EHR Incentive Programs in 2015: Alternate Exclusions & Specifications

CMS recently published a final rule that specifies criteria that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet in order to participate in the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs. The final rule's provisions encompass 2015 through 2017 as well as Stage 3 in 2018 and beyond.

The final rule includes alternate exclusions and specifications for certain objectives and measures where there is not a Stage 1 measure equivalent to the Modified Stage 2 (2015 through 2017) measure or where a menu measure is now a requirement.

Overview of Alternate Exclusions and Specifications

To assist providers who may have already started working on meaningful use in 2015, there are alternate exclusions and specifications within individual objectives for providers. These include:

- Allowing providers who were previously scheduled to be in a Stage 1 EHR reporting period for 2015 to use a lower threshold for certain measures.
- Allowing providers to exclude for Stage 2 measures in 2015 for which there is no Stage 1
 equivalent.
- Allowing providers to claim an alternate exclusion where previously a menu measure is now a requirement.

Alternate exclusions are based on the provider's scheduled stage and are available only for 2015 (and in 2016 for some limited cases). They are intended to accommodate changes required for the transition to the Modified Stage 2 objectives and measures.

There are also exclusions for some measures that are *not* based on the provider's stage, but on other factors as there have been in both Stage 1 and Stage 2 of the program. These exclusions—which are described for each measure as applicable—are specific to the measure and not dependent on the Stage or year of participation.

How to Attest Using Alternate Exclusions and Specifications

Providers scheduled to be in Stage 1 may opt to use the alternate exclusions and specifications, but they are not required to use them. The Medicare and Medicaid EHR Incentive Programs registration and attestation system will automatically identify those providers who are eligible for alternate exclusions and specifications. Upon attestation, these providers will be offered the option to attest to the Modified Stage 2 objective and measure, and the option to attest to the alternate specification or claim the alternate exclusion, if available. The provider may independently select the option available to them for each measure for which an alternate specification or exclusion may apply.

2015 Alternate Exclusions and Specifications

There are **9 objectives for EPs** that include alternate exclusions and specifications for providers in 2015.

Alternate Exclusions and Specifications - Eligible Professionals (EPs)

	n EHR reporting period in 2015 only, an EP who is scheduled to participate in Stage 1 in may satisfy in place of measure 1:
	nate Measure 1: Implement one clinical decision support rule relevant to specialty or high
	ral priority along with the ability to track compliance with that rule.
• •	sure 2: no alternate is available; must answer as written
	nate Measure 1: For Stage 1 providers in 2015, more than 30 percent of all
	ue patients with at least one medication in their medication list seen by the EP
	g the EHR reporting period have at least one medication order entered using
	; or more than 30 percent of medication orders created by the EP during the
	reporting period are recorded using computerized provider order entry.
	nate Exclusion for Measure 2: Providers scheduled to be in Stage 1 in 2015 may claim an
	sion for measure 2 (laboratory orders) of the Stage 2 CPOE objective for an EHR reporting d in 2015.
·	nate Exclusion for Measure 3: Providers scheduled to be in Stage 1 in 2015 may claim an
	sion for measure 3 (radiology orders) of the Stage 2 CPOE objective for an EHR reporting
	d in 2015.
Objective 4: Alter	nate EP Measure: For Stage 1 providers in 2015, more than 40 percent of all permissible
-	criptions written by the EP are transmitted electronically using CEHRT.
Prescribing (eRx)	inputoris writter by the Er are transmitted electromeany asing certific.
	rnate Exclusion: Provider may claim exclusion for the Stage 2 measure that requires the
	tronic transmission of a summary of care document if for an EHR reporting period in 2015,
	were scheduled to demonstrate Stage 1, which does not have an equivalent measure.
	applicable to this objective: FAQ 12817 FAQ 9690 FAQ 10660
Exchange	rnate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Patient
	cific Education objective if for an EHR reporting period in 2015 they were scheduled to
	nonstrate Stage 1 but did not intend to select the Stage 1 Patient Specific Education menu
	ective.
Luucation	applicable to this objective: FAQ 12821 FAQ 12825 FAQ 8231
,	, <u> </u>
	nate Exclusion: Provider may claim exclusion for the measure of the Stage 2 Medication
	nciliation objective if for an EHR reporting period in 2015 they were scheduled to
	onstrate Stage 1 but did not select the Stage 1 Medication Reconciliation menu objective.
Reconciliation	
	rnate Exclusion: Providers may claim exclusion for the second measure if for an EHR
	orting period in 2015 they were scheduled to demonstrate Stage 1, which does not have
	quivalent measure.
Access <u>FAC</u>	<u>12821 FAQ 12825 FAQ 8231</u>
Alte	rnate Exclusion: An EP may claim exclusion for the measure if for an EHR reporting
Objective 9: Secure peri	od in 2015 they were scheduled to demonstrate Stage 1, which does not have an
Messaging equ	ivalent measure.
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	12825 FAQ 8231

	Alternate Exclusions:
Objective 10:	EPs scheduled to be in Stage 1: Must attest to at least 1 measure from the Public Health
Public Health	Reporting Objective Measures 1-3.
Reporting	 May claim an Alternate Exclusion for Measure 1, Measure 2, or Measure 3.

An Alternate Exclusion may only be claimed for up to two measures, then the
provider must either attest to or meet the exclusion requirements for the remaining
measure described in 495.22 (e)(10)(i)(C).

EPs scheduled to be in Stage 2: Must attest to at least 2 measures from the Public Health Reporting Objective Measures 1-3.

• May claim an alternate exclusion for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure) or both.

FAQ 13409

Question: For 2015, how should a provider report on the public health reporting objective if they had planned to be in Stage 1 meaningful use which required sending a test message and continued submission if successful, but did not require registration of intent?

Answer: We did not intend to require providers to engage in new activities during 2015, which may not be feasible after the publication of the final rule in order to successfully demonstrate meaningful use in 2015. Since providers in Stage 1 in 2015 were not previously required to submit a registration of intent to submit data to meet Objective 10 measures, providers may meet the measures by having sent a test message or by being in production. Providers who have sent a test message can be considered to have met Option 2 of Active Engagement - Test and Validation; providers who are in production can be considered to have met Option 3 of Active Engagement - Production.

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